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| Report To: | Health & Social Care Committee | Date: | 28th August 2014 |
| Report By: | Brian Moore Corporate Director Inverclyde Community Health & Care Partnership | Report No: | SW/01/2014/HW |
| Contact Officer: | Helen Watson Head of Service Planning, Health Improvement and Commissioning | Contact No: | 01475 715369 |
| Subject: | Inverclyde Children and Young People Health and Well-being Survey 2013 | | |

1.0 PURPOSE

1.1 The purpose of this report is to –

- a) outline the methodological approaches employed to carry out the research undertaken in all Inverclyde secondary schools.
- b) provide an initial report with a summary of the findings and key indicators
- c) provide suggested directions of travel indicated by the findings and aligned outcomes.

2.0 SUMMARY

- 2.1 All schools in Inverclyde became Health Promoting Schools in 2007. This accreditation was valuable and a real measure of success in Health & Well-being (H&WB) for our establishments. However, the sustainability of H&WB beyond merely the accreditation for an award has been even more vital since that time. It has become increasingly important that, both in terms of curricular delivery and the ethos/ values of our schools, H&WB truly is embraced as the 'Responsibility of All'. Through the Community Planning Partnership, a piece of research was commissioned in 2013 to gather an up-to-date evidence base, directly expressing the views of children and young people from our secondary schools, around their own health and well-being.
- 2.2 Inverclyde CHCP, in collaboration with Inverclyde Council Education Services, NHS Greater Glasgow & Clyde (Public Health Resource Unit) commissioned Traci Leven Research to carry out the fieldwork and report writing.
- 2.3 This is the first survey of its kind in Inverclyde and provides useful baseline data for future surveys, which will monitor progress and trends for key health and well-being indicators. It is expected that the survey findings will help to inform priorities for action among key planning partners at Community Planning level and in individual schools. In addition, the data reported will allow for comparative investigations to be made with Glasgow City and Renfrewshire, where similar surveys have been completed. Some of the data can also be correlated with other national surveys, such as the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS).
- 2.4 The survey was a proactive means of engaging with the young people who took part, which ensures they have a voice and are able to influence future service delivery/ redesign that will be based on their needs, attitudes and behaviours, through this self-reporting.

2.5 Of particular note is the achieved sample total of 3,606 complete questionnaires. The most recently available estimate of the secondary school roll across Inverclyde is 4,362. Thus the achieved sample is approximately 83% of the known school roll. This is an unprecedented return, for which everyone who was involved in the research should be acknowledged.

3.0 RECOMMENDATIONS

3.1 The Health and Social Care Committee notes this report and approves the publication of the research findings, including further circulation to the wider locality planning structures, such as SOA4, SOA6 and Inverclyde Alliance Board.

3.2 The Health and Social Care Committee agrees to the further work required, in the analysis of the findings, through engaging with the young people, schools and their communities plus partner agencies to take forward agreed and appropriate actions.

3.3 The Health and Social Care Committee gives approval to the continuing work required in the dissemination of the research findings, in partnership with Inverclyde Council Education Services.

3.4 It is proposed that the Health and Social Care Committee accept an invitation to be an integral part of the ongoing work and developments and agree to actively participate in the seminars/ summits mentioned in 5.2.

3.5 The Health and Social Care Committee agree to the CHCP Sub-Committee receiving a further report, including a detailed analysis of the findings, in comparison to other data sources such as the surveys of neighbouring authorities, SALSUS and the WHO's Health Behaviours In School Age Children Survey, and be kept apprised of developments.

Brian Moore
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

Methodology:

- 4.1 The aim of the research was to gather the views of secondary school young people and focus on contemporary models of health and well-being. Moreover, the outcomes of the research were to be used to assess progress in health and well-being and be used to inform the work of the Community Health and Care Partnership, Education Communities and Organisational Development, Community Planning Partners and individual schools.
- 4.2 In the developing stages of the project, a range of key stakeholders and partners were invited to a number of meetings, in order to ensure full consultation on the questionnaire. The commitment from partners cannot be underestimated and is a true reflection of the locality's efforts to work collaboratively.
- 4.3 With regard to point 4.2 above and to respond to these aims, a structured, self-completion questionnaire was developed and approved by the stakeholder group mentioned in 4.1. It explored the issues concerned with:
 - Demographics including age, gender, deprivation category (using postcode as a proxy measure), ethnicity, feeder primary, carer or guardian with whom pupils have main residence.
 - Mental health, self-esteem, worry.
 - Bullying, racism, accidents, illness and disability.
 - Oral health, diet, exercise and travel.
 - Smoking, alcohol, drugs.
 - Awareness and use of health services, youth clubs etc.
 - Social and anti-social behaviour, carer status and future hopes.
- 4.4 In the development of the structured questionnaire, a 24-page booklet as a paper version was developed. Concurrently, an online version using SurveyMonkey was created and reflected the paper version, with modifications to suit completing online (e.g. where the paper questionnaire stated 'please write in', the online version instructed 'please type in'). On the same theme, two paper versions were developed - one for S1-S2 pupils and one for S3-S6 pupils. The versions were the same but with three additional questions for S3-S6 pupils on sexual relationships. The online version automatically generated these three questions for S3-S6 pupils. The two paper versions were printed on different coloured paper (green for S1-S2 and white for S3-S6 pupils).
- 4.5 To provide validation and reliability to the research, a pilot questionnaire was undertaken (September 2013) at one of the Inverclyde mainstream secondary schools with a mix of pupils across all year groups and chosen to represent a mix of boys and girls and a mix of abilities. This resulted in a number of questions which required minor amendments to instructions/questions/response options to ensure clarity for pupils. Final versions of the questionnaire were developed in light of these findings.
- 4.6 To augment the methodology and data collection processes, the following was implemented:
 - **Liaison with Schools:** the lead researcher met with the head teacher and/or other designated staff member(s) at the school to discuss arrangements and logistics for the survey at each school. These discussions centred on suitable dates/times to suit each of the schools; survey method(s); means of grouping pupils; pupil support required; timetabling; letters to parents and contact details for key school staff for further liaison.
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 - **School-Specific Arrangements:** fieldwork took place between 7th October and 28th November 2013 and differed slightly, based on the individual requirements of each of the schools.

- **Pupil Instructions and Information:** for both online and paper surveys, all pupils were given an information note which included an explanation of the purpose of the survey and how data would be used, assurances that participation was voluntary and data would be anonymous. Pupils were given contact information in case of further query or support. Before beginning the survey, pupils were also given verbal instructions by the researcher.
- **Pupil Support:** all schools were offered the option of the researchers providing one-to-one support and/or small supported groups for pupils with learning support needs. However, all mainstream schools opted to have all pupils included in class groups to complete the survey, with support provided by the researcher or learning/behaviour support staff as required.

4.7 In terms of the report analysis that was completed, following data cleaning processes and removal of incomplete responses (n=42), the achieved sample was a total of 3,606 complete questionnaires. The most recently available estimate of the secondary school roll across Inverclyde is 4,362. Thus the achieved sample is approximately 83% of the known school roll.

4.8 The Analysis was conducted in two stages:

1. Compute basic frequencies for each question in the questionnaire.
2. Establish whether there were significant differences between groups for three key independent variables (using the 99% confidence level; $p < 0.01$).

The three key independent variables used for analysis are shown below together with the number and percentage of pupils in each group:

| Key Variables | Description | Numbers and (%): |
|---------------|--|---|
| Stage | Lower school (S1-S2)/Middle school/(S3-S4)/ Upper School (S3-S4) | Lower school: 1,364 37.8% Middle school: 1,290 35.8% Upper school: 952 26.4% Total: 3,606 100.0% |
| Gender | Boys/Girls | Boys: 1,786 49.5% Girls: 1,819 50.5% Total: 3,605 100.0% |

4.9 Summary Findings

The following summary provides information on topic results of the findings and key indicators:

4.9.1 ▪ Diet (Key Indicators):

- 70% ate breakfast
- 33% met the target for fruit/veg consumption
- 29% bought lunch from a shop/van
- 44% ate sweets/chocolate twice or more per day

- 70% of pupils said that they ate breakfast on the morning of the survey. This varied across schools, with the proportion of pupils who had eaten breakfast ranging from 63% to 74% across the six mainstream schools.
- One in eight (12%) did not eat any fruit or vegetables. A third (33%) met the target of consuming five or more portions of fruit and/or vegetables per day. The proportion who met this target ranged from 25% to 39% across mainstream schools.

- During the previous lunchtime, 38% of pupils had a school lunch, 29% bought lunch from a shop/van, 24% had taken a packed lunch and 3% went home for lunch. Six percent of pupils said they did not have any lunch. Patterns of lunchtime practices varied considerably. For example in mainstream schools, the proportion of pupils who bought lunch from a shop/van ranged from 13% to 48%.
- Pupils were also asked how many times in the previous day they had consumed sweets/chocolate, chips/fried potatoes and diet fizzy drinks. 79% had eaten crisps/sweets (and 44% had done so twice or more), 52% had eaten chips/fried potatoes and 54% had consumed diet fizzy drinks.

4.9.2 Physical Activity (Key Indicators):

35% met the target for physical activity
 82% took part in sports clubs at least once a week
 34% used active travel for the journey to school

- Just over a third (35%) of pupils met the target of taking 60 minutes or more of physical activity on five or more days per week. Three in five (58%) were active, but not enough to meet the target. A further 7% were not active at all. The proportion who met the target for physical activity ranged from 29% to 40% across the six mainstream schools.
- Four in five (82%) pupils said they took part in sports/activity clubs at least once a week.
- A third (34%) of pupils used active travel methods (walking/cycling/skating) for their journey to school, 41% used public transport and 25% used private personal transport. This varied considerably across mainstream schools, with the proportion using active travel ranging from 23% to 53%.

4.9.3 Drugs (Key Indicators):

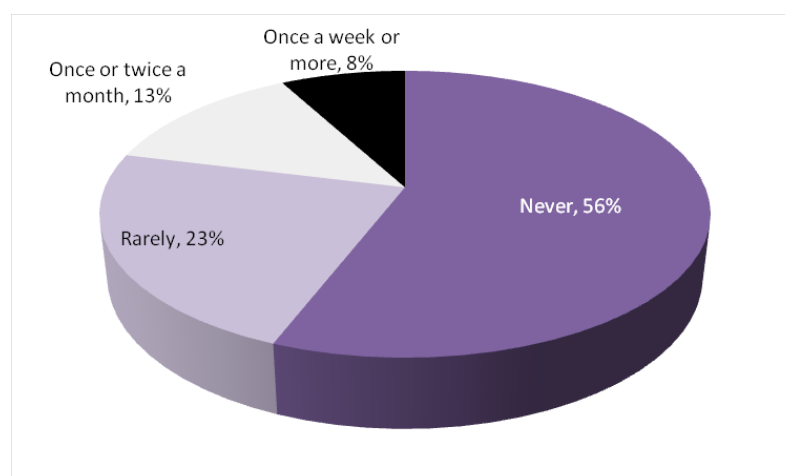
9% had ever used drugs
 8% had used drugs in the last year

- One in 11 pupils (9%) said that they had ever used drugs or legal highs. This ranged from 7% to 12% across the mainstream schools.
- Those who had ever used drugs were given a list of drugs and asked whether they had taken any of these in the last year. Overall, of those who had ever used drugs, 97% had used at least one of the listed drugs in the last year. This equates to 8% of all pupils. The most commonly used drug was cannabis (89%) followed by ecstasy (15%) and cocaine (14%).

4.9.4 Alcohol (Key Indicator):

44% ever drank alcohol

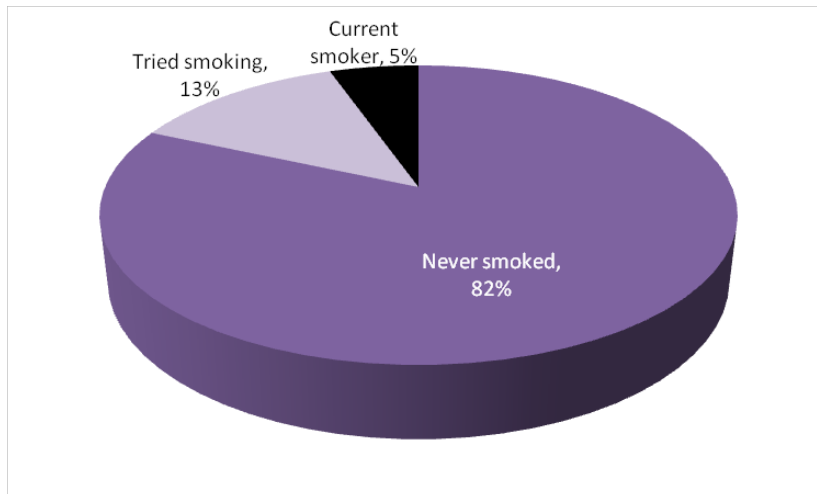
- More than half (56%) of pupils said that they never drank alcohol. Eight percent of pupils said that they drank alcohol once a week or more.



4.9.5 ■ **Smoking (Key Indicators):**

5% were current smokers

- Four in five pupils (82%) said they had never tried smoking. One in 20 (5%) were current smokers. The proportion of current smokers ranged from 3% to 8% across mainstream schools.



■ **Environmental Tobacco (Key Indicators):**

42% lived with a smoker

78% were ever exposed to environmental tobacco

- Two in five (42%) pupils said that someone else smoked at their home.
- All pupils were asked how often they have to breathe in second hand smoke. Seven percent said this happened every day; 14% said 'often'; 56% said 'rarely' and 22% said 'never'. Thus, overall 78% were ever exposed to environmental tobacco. The proportion of pupils ever exposed ranged from 71% to 85% across mainstream schools.

4.9.6 ■ **Oral Health (Key Indicators):**

85% met the target for teeth brushing

85% visited the dentist within last 6 months

- More than four in five (85%) pupils met the target of brushing their teeth twice or more per day. Just 1% had not brushed their teeth at all on the previous day. The proportion who met the target ranged from 79% to 88% across mainstream schools.
- Of those who knew, 99% were registered with a dentist. Of those who could remember, 85% had visited the dentist within the last six months and 97% had done so within the last year.

4.9.7 ■ **Sleep (Key Indicator):**

55% got 8+ hours sleep per night

- Just over half (55%) of pupils said that they got at least eight hours sleep the previous night. The mean response was 7.61 hours. The proportion who met the target of getting eight or more hours sleep per night ranged from 44% to 61% across the mainstream schools.

4.9.8 ■ **Illness and Disability (Key Indicator):**

10% had a limiting illness or disability

- One in three (34%) pupils has at least one physical illness or disability. The most commonly reported conditions were asthma (reported by 16% of all pupils) and eczema/psoriasis/skin condition (10%). One in five (19%) pupils had at least one mental health problem, emotional illness or learning disability. The most common was dyslexia which was reported by 11% of all pupils.
- One in ten pupils (10%) had an illness or disability that limits what they can do.

4.9.9 ■ **Young Carers (Key Indicator):**

14% were carers for family members

- One in five (22%) pupils had someone in their family household with a disability, long-term illness, drug/alcohol problem or mental health issue. Among these pupils, 62% said that they looked after or cared for their family member. Thus, overall, 14% of pupils were carers for someone in their household. The proportion of pupils who were young carers ranged from 8% to 18% across mainstream schools.

4.9.10 ■ **Relationships and Sexual Health (Key Indicators):**

89% had someone to talk to about relationships/sexual health

22% of S3-S6 pupils had been sexually active in past month

- Nine in ten (89%) pupils said there was someone they could talk to about relationships, sexual health, etc. The most common people they could talk to were parents/carers (60%) and friends (55%).
- Among S3-S6 pupils, half (49%) said that a parent/carer had talked to them about sexual health and relationship issues. Just over one in five (22%) S3-S6 pupils had been sexually active in the past month. Among these, 58% said they always used contraception/protection.

4.9.11 ■ **Bullying (Key Indicators):**

20% had been bullied in the last year

14% admitted to bullying others at school

- Sixteen percent of pupils said they had been bullied at school in the last year, 6% had been bullied somewhere else and 6% had been bullied online. Overall, one in five (20%) pupils had been bullied anywhere in the last year. Across mainstream schools, the proportion of pupils who had been bullied anywhere in the last year ranged from 14% to 29%.
- Among those who had been bullied, 57% had reported the bullying to school staff. Where bullying had been reported, just over half (53%) of pupils said it made the situation better.
- One in seven (14%) pupils admitted to having been a bully at their school in the last year. This ranged from 11% to 20% across all mainstream schools.

| Indicators Where Girls Compared More Favourably to Boys: | Indicators Where Boys Compared More Favourably to Girls: |
|---|--|
| <p>Compared to boys, girls were:</p> <ul style="list-style-type: none"> ○ Less likely to get lunch from a shop/van (18% girls; 39% boys) ○ More likely to meet the target for teeth brushing (90% girls; 79% boys) ○ Less likely to have ever taken drugs (7% girls; 12% boys) ○ More likely to have someone to talk to about relationships/sexual health (93% girls; 85% boys) - including being more likely to talk to a parent/carer (63% girls; 57% boys) or a friend (63% girls; 46% boys) ○ More likely to say a parent/carer had talked to them about sexual health/relationships (57% girls; 40% boys) ○ Less likely to have bullied others in the last year (12% girls; 17% boys) ○ More likely to want to go to further education after school (80% girls; 64% boys) | <p>Compared to girls, boys were:</p> <ul style="list-style-type: none"> ○ More likely to eat breakfast (76% boys; 67% girls) ○ More likely to eat lunch (96% boys; 91% girls) ○ More likely to meet the target for physical activity (42% boys; 28% girls) ○ Less likely to have eczema/psoriasis/skin condition (5% boys; 14% girls) ○ Less likely to have a limiting illness or disability (9% boys; 11% girls) ○ Less likely to have a household family member with a disability, long-term illness, drug/alcohol problem or mental health issue (20% boys; 24% girls) ○ Less likely to have been bullied in the last year (15% boys; 24% girls) |

4.9.12 ■ **Post-School Aspirations (Key Indicator):**

72% would like to go to further education after school

- Of those who were able to say, 72% of pupils said they would like to go to further education after school, 23% said they would like to go into employment and 5% said something else.
- One in five (20%) said they would like to live in Inverclyde as an adult while 45% said they would not and 35% said they did not know.

4.9.13 ■ **Key Gender Differences**

- The table, detailed overleaf, and taking into consideration the indicators reported in the preceding sections, the following showed significant differences for local boys and girls.

4.10 **Summary Discussion**

4.10.1 The survey has provided illuminating findings about the health and lifestyles of the secondary school aged population in Inverclyde, including indicators relating to national targets and recommendations. These include the findings that:

- Overall only a third of pupils consumed the recommended amount of fruit/vegetables, and only a quarter of upper school pupils did so.
- Just over a third of pupils met the target for physical activity levels. Again only a quarter of upper school pupils met the target. Girls were less likely than boys to be achieving the recommended levels for physical activity.
- Just over half of pupils (55%) got the recommended eight hours or more of sleep per night and only two in five upper school pupils did so.
- Most pupils (85%) met the target for brushing their teeth twice or more per day and also most (85%) had visited a dentist within the last six months.

The survey also highlighted key findings for smoking, alcohol and drugs:

- Although only a small minority of pupils (5%) were smokers, 42% of pupils lived with a smoker and overall more than three in four pupils were ever exposed to environmental smoke.
- While overall 44% of pupils said they ever drank alcohol, this rose considerably with age, from 19% of lower school pupils to 71% of upper school pupils. Most alcohol consumption was occasional or infrequent, but a small minority (8%) of pupils drank alcohol once a week or more.
- Overall, one in eleven pupils had ever tried drugs, although this rose from 2% among lower school pupils to 16% among upper school pupils.

The survey also highlighted that overall one in five pupils had been bullied in the last year, and this rose to one in four among lower school pupils.

5.0 PROPOSALS

- 5.1 It is proposed that the Health and Social Care Committee notes the contents of this report and approves the publication of the research findings.
- 5.2 In light of the findings and concurrent with the actions identified in 3.2 (above), the Health and Social Care Committee agrees to further engaging with the young people, schools and their communities plus partner agencies to take forward agreed and appropriate actions. This will be carried out in discussion with the schools and partners, through seminars/summits.
- 5.3 It is proposed that the Health and Social Care Committee accept an invitation to be an integral part of the ongoing work and developments and agree to actively participate in the seminars/ summits mentioned in 5.2.
- 5.4 The Health and Social Care Committee agree to the CHCP Sub-Committee receiving a further report, including a detailed analysis of the findings, in comparison to other data sources such as the surveys of neighbouring authorities, SALSUS and the WHO's Health Behaviours In School Age Children Survey, and be kept apprised of developments
- 5.5 It is proposed that the Health and Social Care Committee approves the further circulation of the report findings to the wider locality planning structures, such as SOA4, SOA6 and Inverclyde Alliance Board.

6.0 IMPLICATIONS

Finance

- 6.1 None at the time of this report. Spend was contained within budget commitments for 2013/14.

Financial Implications:

One off Costs

| Cost Centre | Budget Heading | Budget Years | Proposed Spend this Report £000 | Virement From | Other Comments |
|-------------|----------------|--------------|---------------------------------|---------------|----------------|
| N/A | | | | | |

Annually Recurring Costs/ (Savings)

| Cost Centre | Budget Heading | With Effect | Annual Net Impact £000 | Virement From (If | Other Comments |
|-------------|----------------|-------------|------------------------|-------------------|----------------|
|-------------|----------------|-------------|------------------------|-------------------|----------------|

| | | | | | |
|-----|--|-------------|--|--------------------|--|
| | | from | | Applicable) | |
| N/A | | | | | |

Legal

6.2 None at the time of this report

Human Resources

6.3 None at this time of this report.

Equalities

6.4 There are no foreseen negative equalities implications. There are key actions in the recommendation that have been designed to impact favourably on people with protected characteristics, and to address the inequalities that persist in Inverclyde.

Has an Equality Impact Assessment been carried out?

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YES (see attached appendix)

NO - This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

Repopulation

6.5 None at this time of this report, however, within the full report there is data gathered that will be shared with the SOA1 Outcome Delivery Group.

7.0 CONSULTATION

7.1 A series of meetings have been held in the development of the project with associated strategic planning structures, such as SOA4 and SOA6.

7.2 Stakeholder meetings have been convened in the development of the structured questionnaire.

7.3 A pilot questionnaire was undertaken (September 2013) with at one of the Inverclyde mainstream secondary schools with a mix of pupils across all year groups and chosen to represent a mix of boys and girls and a mix of abilities.

8.0 LIST OF BACKGROUND PAPERS

8.1 A copy of the procurement information is available on request.

8.2 The full local authority report, once approved by Committee, is available on request.

